

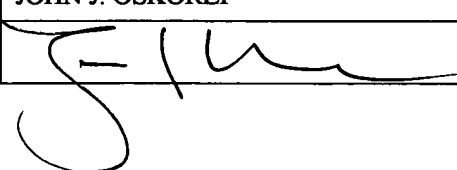
121203  
16523 U.S. PTO

# UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new non-provisional applications under 37 CFR 1.53(b))

031088 U.S. PTO  
10/735112

121203

<b>Attorney Docket No.</b>		HSJ9-2003-0144US1		(0107-0043)	
<b>First Inventor or Application Identifier:</b>		Allen			
<b>Title:</b>		IMPROVED DAMASCENE METHOD FOR FORMING WRITE COILS OF MAGNETIC HEADS			
<b>Express Mail Label No.:</b>		EV 300425564 US			
<b>Application Elements</b> (See MPEP chapter 600 concerning utility patent application contents)			<b>ADDRESS TO:</b> MAIL STOP PATENT APPLICATION Commissioner For Patents P.O. Box 1450 Alexandria, VA 22313-1450		
<p>1. <input checked="" type="checkbox"/> <b>Fee Transmittal Form</b> (Submit an original, and a duplicate for fee processing)</p> <p>2. <input checked="" type="checkbox"/> <b>Specification</b> [Total Pages <u>16</u>] (preferred arrangement set forth below)</p> <ul style="list-style-type: none"><li>• Descriptive title of the Invention</li><li>• Cross References to Related Applications</li><li>• Statement Regarding Fed sponsored R&amp;D</li><li>• Background of the Invention</li><li>• Brief Summary of the Invention</li><li>• Brief Description of the Drawings (if filed)</li><li>• Detailed Description</li><li>• Claim(s)</li><li>• Abstract of the Disclosure</li></ul> <p>3. <input checked="" type="checkbox"/> <b>Drawing(s)</b> (35 USC 113) [Total sheets <u>7</u>]</p> <p>4. <input checked="" type="checkbox"/> <b>Oath or Declaration</b> [Total Pages <u>3</u>]</p> <p>a. <input type="checkbox"/> Newly executed (original or copy)</p> <p>b. <input type="checkbox"/> Copy from prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 17 completed) [Note Box 5 below]</p> <p>i. <input type="checkbox"/> <b>Deletion of Inventor(s)</b> Signed statement attached in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p> <p>5. <input type="checkbox"/> <b>Incorporation by Reference</b> (useable if Box 4b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.</p> <p>6. <input type="checkbox"/> Microfiche Computer Program (Appendix)</p> <p>7. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)</p> <p>a. <input type="checkbox"/> Computer Readable Copy</p> <p>b. <input type="checkbox"/> Paper Copy (identical to computer copy)</p> <p>c. <input type="checkbox"/> Statement Verifying identity</p>					
<b>ACCOMPANYING APPLICATION PARTS</b>					
<p>8. <input checked="" type="checkbox"/> Assignment</p> <p>9. <input type="checkbox"/> 37 CFR 3.73(b) Statement (when there is an assignee)</p> <p>10. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>11. <input checked="" type="checkbox"/> Information Disclosure <input checked="" type="checkbox"/> Copies of IDS Statement (Form 1449) Citations</p> <p>12. <input type="checkbox"/> Preliminary Amendment</p> <p>13. <input checked="" type="checkbox"/> Return Receipt Postcard (CPEP 503) (Should be specifically itemized)</p> <p>14. <input type="checkbox"/> Small Entity <input type="checkbox"/> Statement filed in prior application, Statement Status is still proper and desired</p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)</p> <p>16. <input checked="" type="checkbox"/> OTHER: Express Mail Certification <input type="checkbox"/> Check # <input type="text"/> (\$ <input 6"="" type="text/&gt;)&lt;/p&gt;&lt;/td&gt;&lt;/tr&gt;&lt;tr&gt;&lt;td colspan="/><p>17. If a <b>CONTINUING APPLICATION</b>, check appropriate box and supply the requisite information: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-In-Part of prior application no.: Prior application information: Examiner: <input type="text"/> Group/Art Unit: <input type="text"/></p></p>					
<b>18. CORRESPONDENCE ADDRESS</b>					
<p><input type="checkbox"/> Customer Number ( <input type="text"/> ) Or Bar Code Label</p> <p>OR</p> <p><input checked="" type="checkbox"/> Correspondence Address Below</p>					
<b>NAME</b>		ATTN: John J. Oskorep			
<b>ADDRESS</b>		One Magnificent Mile Center 980 N. Michigan Avenue, Suite 1400 Chicago, Illinois 60611			
Telephone: 312-222-1860		Fax No.: 312-214-6303			
<b>Name (print/type)</b>		JOHN J. OSKOREP		<b>Registration No.:</b> (Attorney/Agent)	41,234
<b>Signature</b>				<b>Date</b>	12 Dec 2003

121203 16523 U.S. PTO

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## FEE TRANSMITTAL

<b>Attorney Docket No.</b>	<b>HSJ9-2003-0144US1</b>
<b>First Named Inventor:</b>	<b>Allen</b>
<b>Application Number</b>	not yet assigned
<b>Filing Date:</b>	not yet assigned
<b>Examiner Name:</b>	not yet assigned
<b>Group/Art Unit:</b>	not yet assigned

<b>TOTAL AMOUNT OF PAYMENT:</b>	<b>\$ 806.00</b>
<b>METHOD OF PAYMENT (check One)</b>	1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and/or credit any over payment to:  Deposit Account No.: <b>50-2587</b> Deposit Account Name: <b>Hitachi Global Storage Technologies</b>  <input checked="" type="checkbox"/> Charge any Additional Fee Required Under 37 CFR 1.16 and 1.17  2. <input type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other

### 2. UTILITY Basic Filing Fee & Claims

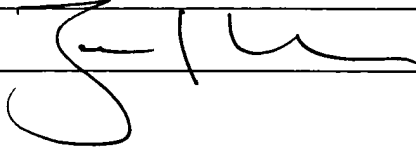
(1) For	(2) No. filed	(3) No. extra	(4) Large Entity	(5) Small Entity	(6) Calculations
Basic Filing Fee	XX	XX	\$ 770.00	\$385.00	\$ 770.00
Total Claims	22 - 20 =	2	X \$ 18.00	X \$ 9.00	\$ 36.00
Independent Claims	2 - 3 =	0	X \$ 86.00	X \$ 43.00	\$ 0.00
Multiple Dependent Claim(s) (if applicable)		0	\$ 290.00	\$145.00	\$ 0.00
<b>Total of above Calculations =</b>					<b>\$ 806.00</b>

Basic Filing Fee	Large Entity	Small Entity	Total
Design filing fee	\$ 340.00	\$ 170.00	\$ 0.00
Reissue filing fee	\$ 770.00	\$ 385.00	\$ 0.00
Provisional filing fee	\$ 160.00	\$ 80.00	\$ 0.00
<b>Total of above Calculations =</b>			<b>\$ 0.00</b>

### 3. ADDITIONAL FEES

Fee Description	Large Entity	Small Entity	Other
Assignment Recordation	\$ 40.00	\$	\$ 0.00
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
<b>TOTAL:</b>			<b>\$ 0.00</b>

<b>Name (print/type)</b>	<b>John J. Oskorep</b>	<b>Registration No.: (Attorney/Agent)</b>	<b>41,234</b>
<b>Signature</b>		<b>Date</b>	<b>12 Dec 2003</b>

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**DATE OF DEPOSIT:** 12 Dec 2003

**I HEREBY CERTIFY THAT THIS PAPER OR FEE IS BEING DEPOSITED  
WITH THE UNITED STATES POSTAL SERVICE "EXPRESS MAIL POST  
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John J. Oskorep

**NAME**



**SIGNATURE**